

APPLICATION DATA SHEET**Application Information**

Application number::
Filing Date::
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD disks::
Number of copies of CDs::
Sequence submission?::
Computer Readable Form (CRF)?:: No
Number of copies of CRF::
Title :: FUEL CELL STACKS OF ALTERNATING
POLARITY MEMBRANE ELECTRODE
ASSEMBLIES
Attorney Docket Number:: 130109.486
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 7
Small Entity?:: No
Petition included?::
Petition Type::
Licensed U.S. Gov't Agency::
Contract or Grant No::
Secrecy Order in Parent Appl.?:: No

First Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Emerson
Middle Name:: R
Family Name:: Gallagher
Name Suffix::
City of Residence:: Vancouver
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: 3233 West 8th Avenue
City of mailing address:: Vancouver
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V6K 2C6

Second Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Canada
Status:: Full Capacity
Given Name:: Maura
Middle Name:: H
Family Name:: Malone
Name Suffix::
City of Residence:: Vancouver
State or Province of Residence:: BC
Country of Residence:: Canada
Street of mailing address:: #101 – 1235 West 13th Avenue
City of mailing address:: Vancouver
State or Province of mailing address:: BC
Country of mailing address:: Canada
Postal or Zip Code of mailing address:: V6H 1N5

Correspondence InformationCorrespondence Customer Number :: **00500****Representative Information**

Representative Customer Number::		00500
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Domestic Priority Information

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	
Street of mailing address::	
City of mailing address::	
State or Province of mailing address::	
Country of mailing address::	
Postal or Zip Code of mailing address::	